

ATTACHMENT 1

Revenue code conversion chart for nursing home services

(For claims and prior authorization requests submitted after HIPAA implementation)

The following table lists the nationally recognized revenue codes that providers will be required to use when submitting claims for nursing home services. A future *Wisconsin Medicaid and BadgerCare Update* will notify providers of the specific effective dates for Wisconsin Medicaid's implementation of the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Before HIPAA implementation		After HIPAA implementation		
Local level of care code	Local level of care code description	Replaced by revenue code	Revenue code description	Required condition code
20	Skilled nursing room/bed	0194	Subacute Care Level IV — Intensive Care: Extensive nursing and technical intervention.	
21	Intermediate care — room/bed	0193	Subacute Care Level III — Complex Care: Moderate to extensive nursing intervention.	
22	Personal care room/bed	0192	Subacute Care Level II — Comprehensive care: Moderate nursing intervention.	
23	Residential care room/bed	0191	Subacute Care Level I — Skilled Care: Minimal nursing intervention.	
25	Intensive skilled room/bed	0199	Other subacute care intensive treatment.	
26	DD1A — All developmentally disabled children under the age of 18 and adults of any age who require active treatment and whose health status is fragile, unstable, or relatively unstable.	0190	Subacute Care — General Classification + Disability.	A5
27	DD1B — All developmentally disabled children under the age of 18 and adults of any age who require active treatment and who exhibit behaviors of sufficient frequency, severity, or duration to cause a threat to health, safety, or welfare of themselves or others. These persons may manifest hyperactive behaviors; they may be security risks.	0194	Subacute Care Level IV — Intensive Care: Extensive nursing and technical intervention + Disability.	A5
28	DD2 — The DD2 describes an adult who requires active treatment to learn basic ADL and social skills. These persons have the learning capacity to perform some of these skills with staff intervention.	0193	Subacute Care Level III — Complex Care: Moderate to extensive nursing intervention + Disability.	A5
29	DD3 — The DD3 care level describes an adult who requires active treatment to learn a variety of skills in many areas, including, but not limited to, social skills, leisure skills, domestic, and vocational skills. These persons have the learning capacity to perform some of these skills independently and some with staff intervention.	0192	Subacute Care Level II — Comprehensive Care: Moderate nursing intervention + Disability.	A5

Before HIPAA implementation		After HIPAA implementation		
Local code	Local code description	Replaced by revenue code	Revenue code description	Required condition code
30	Skilled — Hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider.	
31	Immediate hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider.	
32	Personal — Hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider.	
33	Residential — Hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider.	
35	Intensive SNF — Hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider.	
36	DD1A — Hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider + Disability.	A5
37	DD1B — Hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider + Disability.	A5
38	DD2 — Hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider + Disability.	A5
39	DD3 — Hospital bedhold	0185	Leave of Absence — Nursing Home (for Hospitalization). Charges for holding a room while the patient is temporarily away from the provider + Disability.	A5
40	Skilled therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider.	
41	Intermediate therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider.	
42	Personal therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider.	
43	Residential therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider.	

Before HIPAA implementation		After HIPAA implementation		
Local code	Local code description	Replaced by revenue code	Revenue code description	Required condition code
45	Intensive SNF — Therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider.	
46	DD1A — Therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider + Disability.	A5
47	DD1B — Therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider + Disability.	A5
48	DD2 — Therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider + Disability.	A5
49	DD3 — Therapeutic leave	0183	Leave of Absence — Therapeutic Leave. Charges for holding a room while the patient is temporarily away from the provider + Disability.	A5
80	Brain injured	0199	Subacute Care — Other + Disability.	A5
81	Intensive brain injured	0199	Subacute Care — Other.	X0
M6	Non-covered vision services	0962	Professional fees — Ophthalmology.	
M7	Non-covered dental services	0969	Professional fees — Other.	
M8	Other non-covered services	0999	Patient Convenience Items — Other.	
N2	Transportation — non-emergency	0960	Professional fees — General classification.	
N3	Laboratory	0300	Laboratory — General classification. Charges for the performance of diagnostic and routine clinical laboratory tests.	
N4	X-ray	0320	Radiology — Diagnostic — General classification. Charges for diagnostic radiology services provided for the examination and care of patients. Includes taking, processing, and interpreting radiographs and fluorographs.	
N6	Private room rate	0110	Room and Board — Private (Medical or General) — General classification. Routine service charges for single bed rooms.	
N7	Ventilator Care	0946	Other Therapeutic Services — Complex Medical Equipment — Routine. Charges for other therapeutic services not otherwise categorized.	
N9	AIDS/ARC	0940	Other Therapeutic Services — General Classification. Charges for other therapeutic services not otherwise categorized.	